



State of New Jersey
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF VETERINARY MEDICAL EXAMINERS
124 HALSEY STREET, 6TH FLOOR, NEWARK NJ

CHRISTINE TODD WHITMAN
Governor

JOHN J. FARMER, JR.
~~PETER VERMEER~~
Attorney General
MARK S. HERR
Director

October 28, 1999

Mailing Address:
P.O. Box 45020
Newark NJ 07101
(973) 504-6500

Hesham El-Akbawy, DVM
137-H Overmount Ave.
West Paterson, NJ 07424

RE: File #99-069 – “Duchess” Viveiros

Dear Dr. El-Akbawy:

This is to advise you that the New Jersey State Board of Veterinary Medical Examiners has reviewed certain information regarding activity in which you were engaged as a Board licensee. The Board's initial review discloses what appears to be a violation of N.J.A.C. 13:44-4.9, encompassing records keeping violations in that your medical records for this dog do not support the treatment indicated in your letter to the Board.

You are hereby offered the opportunity to settle this matter and avoid the initiation of formal disciplinary proceedings by signing the enclosed certification and paying a civil penalty in the amount of **\$500**.

Alternatively, you may waive your right to a hearing and submit a written statement or explanation to the Board. The Board will then consider this statement and render a final decision. You may also request a hearing in which case the matter will be scheduled, and this notice will serve as a complaint. At the hearing you may, either personally or with the assistance of an attorney, submit such testimony or other evidence as you may deem necessary in order for the Board to finally determine whether the unlawful acts set forth herein have been proven.

You should also be aware that upon final evaluation of the evidence submitted at the hearing, the Board may, if unlawful acts are found to exist, assess civil penalties in an amount greater than that herein offered in settlement. Additionally, the Board may, if the facts are found to so warrant, enter an order requiring the restoration of any monies acquired by unlawful acts, the payment of costs and directing that you cease and desist from continued use of those acts found to be unlawful.

Hesham El-Akbawy, DVM

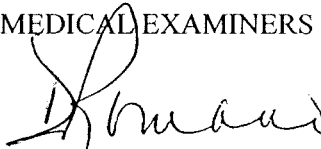
October 28, 1999

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The enclosed certification must be returned to the Board with your indicated course of action within ten (10) days following receipt hereof. In the event that the Board receives no response within ten (10) days, the Board will consider you in default, the allegations contained herein shall be deemed uncontested, and the Board will proceed to finally review this matter and enter an appropriate final order.

Yours very truly,

STATE BOARD OF VETERINARY
MEDICAL EXAMINERS



DIANE I. ROMANO
Executive Director

Thank you for using Return Receipt Service.

| | | | |
|---|--|---|--|
| RECEIVED NOV 03 1999 VETERINARY MEDICAL EXAMINERS | | I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery | |
| SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the return address. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered. | | 3. Article Addressed to: Hesham A El-Akbawy 137-H Overmount Ave W Paterson NJ 07424-3216 | |
| 4. Article Number Z 116 417 141 | | 4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD | |
| 5. Received By: (Print Name) Hesham El-Akbawy | | 7. Date of Delivery 11-1-99 | |
| 6. Signature (Addressee or Agent) Hesham El-Akbawy | | 8. Addressee's Address (Only if requested and fee is paid) | |

PS Form 3811, December 1994
102595-99-B-0223 Domestic Return Receipt

CERTIFICATION

I have received the Board's letter dated _____ regarding alleged violations of the Board's enabling act and/or Board regulations.

Please check one:

X The allegations set forth therein are acknowledged, and I enclose herewith a check in the amount of \$ 500 payable to the State Board of Veterinary Medical Examiners. Assurance is hereby given that the conduct alleged in the notice will not continue or recur.

_____ I hereby waive any right which I may have to a hearing in this matter and submit a written statement for the Board's final consideration in this matter.

_____ A hearing on this matter before the Board is hereby requested. The Board may, however, refer this matter to the Office of Administrative Law for hearing.

File Number: 99-069

Michael Elkhany
(signature)

Date: 11-05-99

